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Mar 10 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # G75032

(4)

1. Corporation Name

AMERICAN ALUMINUM, INC.



Principal Place of Business

Mailing Address

% ROBERT A. DICKINSON
460 SOUTH INDIANA AVE.
ENGLEWOOD FL 34223-3702

% ROBERT A. DICKINSON
460 SOUTH INDIANA AVE.
ENGLEWOOD FL 34223-3702

3. Date Incorporated or Qualified

12/19/1983

3a. Date of Last Report

03/18/1996

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

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25

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9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

DICKINSON, ROBERT A.
460 SOUTH INDIANA AVE.
ENGLEWOOD FL 33533

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85

Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature typed or printed name of registered agent and title if applicable

(NOTE: Registered agent signature required when reinstating)

Robert A. Dickinson

3/4/97

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE DP ☐ DELETE

NAME VAN TILBURG, GEORGE
STREET ADDRESS 550 LEACH ST
CITY-ST-ZIP ENGLEWOOD, FL 00000

TITLE V ☐ DELETE

NAME NICOL, WILLIAM H
STREET ADDRESS 840 N ELM
CITY-ST-ZIP ENGLEWOOD, FL 00000

TITLE S ☐ DELETE

NAME VAN TILBURG, KATHERINE
STREET ADDRESS 550 LEACH ST
CITY-ST-ZIP ENGLEWOOD, FL 00000

TITLE T ☐ DELETE

NAME DAVIS, CHRISTOPHER J
STREET ADDRESS 550 LEACH ST
CITY-ST-ZIP ENGLEWOOD FL

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address

SIGNATURE:

George Van Tilburg GEORGE VANTILBURG (941) 474-2980

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone

CR2E034 (9/96)